2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2016
Secretary of State
CC0871896873

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Entity Name: DEXTRYS, INC.

Current Principal Place of Business:

4 MIDDLE STREET
SUITE 226
NEWBURYPORT, MA 01950

Current Mailing Address:

4 MIDDLE STREET
SUITE 226
NEWBURYPORT, MA 01950 US

FEI Number: 04-3138280

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO, PRESIDENT
Name	MURPHY, WILLIAM
Address	4 MIDDLE STREET SUITE 226
City-State-Zip:	NEWBURYPORT MA 01950

Title	D
Name	PERKINS, ALAN
Address	2 DANCERS IMAGE LANE
City-State-Zip:	N. HAMPTON NH 03862

Title	D
Name	KEANE, BRIAN
Address	4 MIDDLE STREET SUITE 226
City-State-Zip:	NEWBURYPORT MA 01950

Title	DIRECTOR, CHAIRMAN
Name	KOHLSDORF, MICHAEL
Address	4 MIDDLE STREET SUITE 226
City-State-Zip:	NEWBURYPORT MA 01950

Title	D
Name	GARFINKEL, NEIL
Address	ONE LETTERMAN DR., BLDG C, SUITE 410
City-State-Zip:	SAN FRANCISCO CA 94129

Title	D
Name	AGLE, BRIAN
Address	ONE LETTERMAN DR., BLDG C, SUITE 410
City-State-Zip:	SAN FRANCISCO CA 94129

Title	SECRETARY, TREASURER
Name	O'BRIEN, MICHAEL
Address	4 MIDDLE STREET STE 226
City-State-Zip:	NEWBURYPORT MA 01950

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL S. O'BRIEN — SECRETARY & TREASURER — 01/23/2016

Electronic Signature of Signing Officer/Director Detail — Date